The Argonne Materials Order System (AMOS)
Authorization of Requisitioner for Decentralized Order Entry

For payroll # _____ **Name** _____

Cost Center # _____ **Signature** _____
                                                        of the Cost Center Manager

_____ **New Request for Authorization**   **Date** _____

_____ **Delete Existing Authorization**

RESPONSIBILITIES OF THE REQUISITIONER USING Decentralized Order Entry

You are responsible for adhering to all procedures and policies published and amended for this function by the OCF-Procurement Department. Because AMOS is a client/server application, your workstation now becomes an integral part of administrative computing. Therefore, you must guard against others gaining unauthorized access to AMOS through your workstation. You are responsible for exiting your AMOS session before you leave your workstation unattended or having a "screen saver" installed that will prevent another person from using your AMOS session while you are away from your desk. You must not share your AMOS password. After the AMOS client software is installed on your workstation, you are then responsible for informing your network administrator that you are an administrative computing client before new applications, new equipment, or new configuration parameters are installed on your computer. You should designate as your backup someone who is an authorized AMOS decentralized order entry user. Any infractions of the procedures or policies of OCF-PRO are grounds for revocation of these privileges.

ACCEPTANCE OF RESPONSIBILITIES BY THE REQUISITIONER

I understand my responsibilities and I agree to adhere to any and all procedures and regulations regarding

the AMOS Decentralized Order Entry.   My backup is _____.

Signature _____   **Date** _____
                    of the Requisitioner

I have a _____ PC with Windows 3.1 _____ PC with Windows 95 _____ PC with Windows NT

                    _____ MacIntosh _____ Power Mac _____ Unix workstation

I am located in Building _____ Room _____   My telephone number is _____

DO NOT WRITE BELOW THIS LINE - FOR USE BY OCF-PRO MANAGER

DELEGATION OF AUTHORITY

Signature _____   **Date** _____
                    of the Procurement Manager

Forward form to OCF-PRO Customer Service in Building 201 or FAX to Procurement at 2-4517
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